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41

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/465,081
Filing Date	December 16, 1999
First Named Inventor	Beezer et al.
Group Art Unit	2176
Confirmation Number	8435
Examiner Name	M. Nguyen
Attorney Docket Number	003797.84608

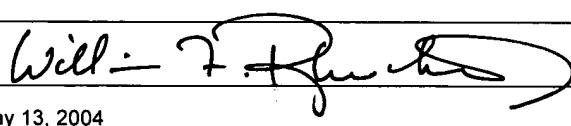
Total Number of Pages in This Submission

8

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	RECEIVED
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		MAY 14 2004

Technology Center 2100

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Christopher R. Glemboki, Reg., No. 38,800
Signature by	 Reg. No. 34,701
Date	May 13, 2004

CERTIFICATE OF MAILING

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)

0

Complete If Known

Application Number	09/465,081
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METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																					
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																																																																																																																									
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*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY						Complete (if applicable)	
Name (Print/Type)	Christopher R. Glembocki,	Registration No. (Attorney/Agent)	38,800	Telephone	202-824-3000		
Signature	by [Signature]	Reg. 34,701	Date	May 13, 2004			

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